

Likelihood to Recommend: Major Themes and Representative Comments

Ron Wyatt, MD, MHA, Chief Quality Officer

June 21, 2019 – Board of Directors Quality & Patient Safety Committee Meeting

June 28, 2019 – Board of Directors Meeting



COOK COUNTY
HEALTH

The Name of the Survey

- Official name:

CAHPS® HOSPITAL SURVEY

- Also known as **Hospital CAHPS®** or

HCAHPS

➡ Pronounced "*H-caps*"

CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality, a U.S. Government agency.

Why is it important

- Consumers have access to the data
- Consumers relate more easily to CAHPS[®] data than to clinical data
- Some use CAHPS[®] data to choose hospitals
- CAHPS[®] is publicly available
- Media covers the reports
- Promoted by hospitals
- Participation linked to reimbursement
- Has volume, revenue, and reputation implications

Used in Value Based Purchasing

- **Nurse Communication**
- **Doctor Communication**
- **Cleanliness and quietness**
- **Responsiveness of hospital staff**
- **Pain management**
- **Communication about medications**
- **Discharge Information**
- **Overall hospital rating**

Stroger Compared to National (CMS data)

July 2017- June 2018

HCAHPS Measure	Stroger Hospital Response Percentages (July 2017 – June 2018 discharges)			CMS National Results (July 2017 – June 2018 discharges) -rounded to whole numbers		
	0-6	7-8	9-10	0-6	7-8	9-10
Rate Hospital 0-10 (0-6; 7-8; 9-10)	9.8%	24.0%	66.2%	8%	19%	73%
	Definitely No & Probably No	Probably Yes	Definitely Yes	Definitely No & Probably No	Probably Yes	Definitely Yes
Recommend the hospital	5.7%	24.4%	69.9%	5%	23%	72%
	Never & Sometimes	Usually	Always	Never & Sometimes	Usually	Always
Communication with Nurses Domain	10.6%	22.7%	66.7%	4%	16%	80%
	Never & Sometimes	Usually	Always	Never & Sometimes	Usually	Always
Response of Hospital Staff Domain	23.1%	23.9%	53.0%	9%	21%	70%
	Never & Sometimes	Usually	Always	Never & Sometimes	Usually	Always
Communication with Doctors Domain	5.0%	13.2%	81.8%	5%	14%	81%
	Never & Sometimes	Usually	Always	Never & Sometimes	Usually	Always
Cleanliness of Hospital Environment	20.8%	24.3%	54.9%	7%	18%	75%
	Never & Sometimes	Usually	Always	Never & Sometimes	Usually	Always
Quietness of Hospital Environment	17.2%	29.5%	53.3%	10%	28%	62%
	Never & Sometimes	Usually	Always	Never & Sometimes	Usually	Always
	Never & Sometimes	Usually	Always	Never & Sometimes	Usually	Always
Communication about Medicines Domain	24.0%	19.0%	56.9%	17%	17%	66%
	-	No	Yes	-	No	Yes
Discharge Information Domain	-	17.7%	82.3%	-	13%	87%
	Strongly Disagree & Disagree	Agree	Strongly Agree	Strongly Disagree & Disagree	Agree	Strongly Agree
Care Transitions Domain	7.1%	44.3%	48.6%	5%	42%	53%



COOK COUNTY
HEALTH

Source: Press-Ganey

HCAHPS Stroger (All Surveys)

June 1, 2018-May 31, 2019

HCAHPS Measure	Top Box Score	All Press Ganey Database Percentile Rank
Rate Hospital 0-10	69.6%	37 th Percentile
Recommend the hospital	72.6%	51 st Percentile
Communication with Nurses Domain	69.3%	3 rd Percentile
Response of Hospital Staff Domain	57.6%	10 th Percentile
Communication with Doctors Domain	83.0%	65 th Percentile
Hospital Environment Domain	57.5%	12 th Percentile
Communication about Pain Domain	57.4%	15 th Percentile
Communication about Medicines Domain	56.8%	11 th Percentile
Discharge Information Domain	81.7%	10 th Percentile
Care Transitions Domain	51.3%	39 th Percentile



Press Ganey Contract

Stroger Hospital

Annual Surveying Parameters

- Up to 58,145 mailed surveys with CCH cover letter and biz return envelope (wave 1:15,000 and wave 2:12,150) for Inpatient HCAHPS and CAHPS for ambulatory surgery.
- Up to 792 completed phone surveys in English and Spanish for the Stroger Emergency Department.

Provident Hospital

Annual Surveying Parameters

- Inpatient HCAHPS (mail): 1,150 wave 1: 1,150 and wave 2: 1,925
- Emergency Department (phone in English and Spanish): 792 completed calls

Ambulatory and Community Health Network (ACHN)

Annual Surveying Parameters

- Medical Practice (mail) – 25,920
- 17 sites: GMC (roll-up), Prieto, Austin, Logan Square, Arlington Heights, Near South, Englewood, Cottage Grove, Robbins, Cicero, Oak Forest Specialty, Woodlawn, Psych, Sengstacke Specialty, Sengstacke Primary, Stroger Subspecialty, Oak Forest Primary

Press Ganey Contract

Survey Response Rates – Q1 2019 (January through March 2019)

ER Phone Completion Rate – national average phone completion rate: 40.4%

- Stroger ER (66 completed) monthly range of 59.5%-54.6%
- Provident ED (66 completed) monthly range of 66%-55.5%

Ambulatory Surgery – national average ambulatory surgery paper response rate: 30.6%

- Stroger (24-43 returned) monthly range: 10.1%- 14.9%

Inpatient Unit – national official HCAHPS paper survey response rate: 27.7%

- Stroger - 22 units/services surveyed (76-143 surveys returned) monthly range: 0/4.9%-39.1%
- Provident – 8 West (8-10 surveys returned) monthly range: 15.6%-21.7%

MD/Medical Practice/ACHN – national average Medical Practice paper response rate: 18.4%

- Stroger – 17 sites surveyed (145-217 surveys returned) monthly range: 9.4%-10.5%

Press Ganey Surveys

Reasons for low response rates?

Many variables impact so virtually impossible to be definitive.

- Written reminder to “please” fill out survey/we want your feedback” if you get one on depart/discharge forms
- Repeat message verbally by every staff person at the care transition
- Include messaging in routine follow-up phone calls post-depart/discharge
- Posters/other displays/rounding mentioning the surveys

Feedback from Press Ganey on specifics

- No external research on response-rates for safety-net or low-literacy organizations that does not violate proper survey communication in some way
- Safety net organizations might experience greater language barriers and health literacy issues that prevent response, but this is only an inference and there is no definitive cause and effect data.
- Lower scores tend to result in lower response rates, again an inference.
- The PG research team is also doing analysis related to return rates for different survey modes and looking at other variables like race and language. No conclusions have been made.

ACHN

86.8% Mean – 4th percentile rank (compared to 1,199 facilities in PG database nationally)

Major Themes

- **Moving through the visit**
 - Wait time at clinic
 - Information about delays
- **Sensitivity to patient needs**
 - Concern of nurses/assistants for problems
- **Ease of getting the clinic on the phone**
- **Importance of Care Provider (CP)**
 - Ease of obtaining referrals for specialty care
 - Had information about care from specialist doctors
 - Extent CP coordinated your care
 - Ability to see CP of your choice
 - Develops a comprehensive care plan

Source: PG Medical Practice Report Q1 2019

ACHN Mean Scores

May 2019

Patient Experience																			
Press Ganey ACHN (All Clinics) Mean Scores																			
Section/Question	Year 2017	Year 2018	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	18-Sep	18-Oct	18-Nov	18-Dec	Jan-19	Feb-19	Mar-19	Apr-19	May-19
Overall	80	81	82	81	80	78	80	81	82	78	82	83	79	83	79	80	79	82	80
Ease of Getting Clinic on the Phone	60	62	67	68	64	56	63	62	64	60	62	68	60	70	60	65	63	69	65
Moving Through Your Visit	67	68	70	70	67	66	69	66	71	65	71	71	70	72	68	69	69	68	68
Cleanliness of our Practice	84	85	87	85	85	82	82	88	85	83	87	84	84	86	83	85	83	88	87

ACHN: Representative Comments

Voice of the Patient

- Trying to reach the clinic is very difficult since one of their phone numbers doesn't work and they don't pick up.
- Had to schedule the appointment 3 months in advance; our previous appointment was not placed in the system after we called and told we had it.
- Always a good experience with my doctor. He is thorough and understanding.
- Because I don't know how to speak English, they do not treat me well and it is difficult to make appointments.
- It's like watching a family/community in action. I enjoy coming to the office.
- During my last appointment, I waited in line to check-in for 45 minutes and then was told I was already checked as a "no show".
- The times I have had an appointment they have attended to me very well

Provident Hospital

61.9% Top Box- 70.9% percentile rank compared to 3 like facilities

85.1% Mean – 21% percentile rank compared to 10 national facilities

Major Themes

- **Physician**
 - Time physician spent with you
 - Physician's concern for questions/worries
 - Keeping patient informed
- **Discharge**
 - Speed of discharge process
 - Long wait time to be seen in ED
- **Nurses**
 - Keeping patient informed
 - Attitude toward requests
- **Staff**
 - Response to concerns/complaints and attention to personal needs
 - Inclusion in decisions re treatment

Source: HCAHPS Report 7/1/18-12/31/18

Provident Hospital – Representative Comments

Voice of the Patient

8 West Med/Surg unit

- Nurses were very professional (1 comment out of 5 processed)
- I experienced one error regarding the IV (1 of 5)
- The doctor that discharged me was extraordinarily kind. I do not speak English so he took me to the pharmacy and helped me process my order.

Emergency Department

- Triage took too long after waiting 3 hours (1 of 6)
- The doctor didn't want to listen to me; just wanted to give me his own input. I haven't heard test results for 3 weeks (1 of 4)
- Provident Hospital is a very good community hospital. I have nothing but it's all aces in my book. I recommend to anyone and to anybody. There's a caring staff, caring check in staff. The doctors are concerned. The emergency room is very efficient and to the point.

John H. Stroger, Jr. Hospital of Cook County

70.2% Top Box – 49% percentile rank (compared to all PG database)

Major Themes

- **Communication with Nurses**
 - Treat with courtesy and respect
 - Listen carefully and keep you informed
 - Explain in ways you understand
- **Responsiveness of hospital staff**
 - Promptness of call button help
 - Help with toileting as soon as you wanted it
- **Cleanliness of hospital environment**
- **Communication about medicines**
 - Told what medicine is for
 - Told about possible side effects in way you understood

Stroger Hospital: Representative Comments

Voice of the Patient

Med/Surg

- Discharge took too long to get all the right papers
- The rooms were dirty and I had to keep telling them to clean
- I was admitted by a very friendly person

OB

- After I delivered my baby, a nurse made my spouse leave because I was in a double room, even though there was no other patient there
- I had pain from stitches after birth and didn't get enough "numbing medicine"
- The physicians were very professional. I rate you 9 plus.

ED

- My legs were extremely weak and no wheel chair was offered; average wait time to see doctor was 4-8 hours
- The front desk people should be more professional and friendly
- I was very well taken care of, and I think the staff was **excellent** in what they did.

CCU

- Doctors caring for me never introduced themselves before talking to me
- Nurses complained of working overtime and said it was because they were taking care of patients without insurance
- Care was immediate and I was having a heart attack



HIGH RELIABILITY ORGANIZATION STEERING COMMITTEE



Patient Experience

June 2019

Mohammed Abu Realh
Patty Looker
John O'Brien, MD



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What Are We Trying to Accomplish?

Current HCAHPs scores for Stroger Hospital are well below the national average. We hope to improve these by specifically targeting changes in routine activities that effect our HCAHPs scores in areas of communication, cleanliness, and patient assistance.

Project Description

Improving as a Place of Caring

We will focus on improving areas related to *Caring For The Patient*

- Communicating about side effects of medicines patients may never have taken
- Keeping the care areas clean and quiet
- Responding to our patients' needs in a timely fashion

AIM Statement

Within one year, we will increase our HCAHPs scores to be on par with national averages in eight measures (Recommend, COMP 1, 2, 3, 5, 6, Quiet and Clean, through Quick Test of Change Projects on the Med/Surg floors, ER, Units, 4 Flex and Post Partum).

Expected Outcomes

We expect that improvement as a *Place of Caring* will lead to a greater patient satisfaction and create an improved work environment for our employees. As an organization this should improve our patient volumes and reduce employee turnover. This should also lead to improved HCAHPs scores.

HRO Workgroup Activities

Unit	Project Name	Local Leader (Nurse Manager, Physician Sponsor)	Specific Intervention	Duration	Internal Measurement	Project Start Date
Critical Care	How To Increase PG Survey Response Rate	Radha Nair, Critical Care Nurse Managers	Improve communication with patients and family about the importance of completing Patient Surveys	2 Week Intervals	Number of Surveys completed in the Critical Care Division	6/24/2019
4 Flex	Discharge Information	Laretta Wiley, Dr. Isaac Paintsil	Improve specific communication with patients/family of what sings/symptoms to look for after discharge	2 Week Intervals	TBD by the team	6/24/2019
Post Partum	Communication with Nurses	Tashunda Green, Dr. Erica O'Neill	TBD by the team	2 Week Intervals	TBD by the team	6/24/2019
6 East	Communication with Nurses	Beena Philip, Dr. Poushali Bhattacharjee	TBD by the team	2 Week Intervals	TBD by the team	6/24/2019



HRO Workgroup Activities (cont'd)

Unit	Project Name	Local Leader (Nurse Manager, Physician Sponsor)	Specific Intervention	Duration	Internal Measurement	Project Start Date
6 South	Responsiveness of Hospital Staff	Jackie Denis, Dr. Admasu Kumssa	TBD by the team	2 Week Intervals	TBD by the team	6/24/2019
6 West	Medication Communication	Linda Liu, Dr. Natasa Margeta	TBD by the team	2 Week Intervals	1) Round on patients and verify their understanding of medication and side effects. 90% understanding. 2) Improve Press Ganey score for communication about medication side effects	6/3/2019
7 East	Noise Reduction	Lynda Lewis, Dr. Marlon Garcia	TBD by the team	2 Week Intervals	TBD by the team	6/24/2019
8 East	Call Light Response	Kandice Hightower, Dr. Harry Richter III	Every call light on 8 East gets attention within one (1) minute through an RN, PCA/HA response by 10/1/19	3.5 months to date 2 Week Intervals	1) Periodic small test of change cycles to confirm sustainability of process improvement 2) Periodic observation of individual by supervisor to monitor that response and practice standards are being met 3) Staff feedback on the responsiveness standard	3/1/2019
ED	Nurse Bedside Shift Reporting	Annmarie McDonagh, Claudia Wilson	Improve bedside shift report by nurses in the Stroger ED by 90% by 9/1/2019	3.5 months to date 2 Week Intervals	TBD by the team - Pending	3/1/2019

Thank you.



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